

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		8	1-22-99
FORMALITY REVIEW	09	69665	3-2

INDEX OF CLAIMS

✓ ..... Rejected  
 " ..... Allowed  
 - (Through numeral) ... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final	Original	Date
1		1-21-00	
2		2-4-01	
3		2-10-01	
4		2-10-01	
5		2-10-01	
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Claim	Final	Original	Date
51		2-10-01	
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100		2-10-01	

Claim	Final	Original	Date
101		2-10-01	
102		2-10-01	
103		2-10-01	
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146		2-10-01	
147		2-10-01	
148		2-10-01	
149		2-10-01	
150		2-10-01	

If more than 150 claims or 10 actions  
staple additional sheet here

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